

State of Connecticut

GEORGE JEPSEN
ATTORNEY GENERAL



Hartford
July 16, 2012

Sent via first-class mail and e-mail to: jfeldman@goodwin.com

Joan W. Feldman, Esq.
Shipman & Goodwin LLP
One Constitution Plaza
Hartford, CT 06103-1919

Re: Hartford Hospital Data Breach

Dear Ms. ~~Feldman~~ ^{Joan}:

This is in response to your phone call this morning notifying my office of a data breach discovered by Hartford Hospital on June 25, 2012, involving the apparent theft of an unencrypted laptop containing protected health information (PHI) and personal information (PI) of Connecticut residents. You informed my office that, at this point, Hartford Hospital has determined that the data breach has affected approximately 9,000 patients, of which the vast majority are Connecticut residents.

In light of the possible impact on residents in Connecticut, I am requesting that you provide my office with detailed information on the status of this data breach, to include the steps taken to protect affected individuals and the procedures adopted to prevent future breaches of this kind. While some of this information may have been included in your phone conversation with my office, please provide responses to the following by July 30, 2012:

1. Please identify the corporate/business entity that was responsible for this data breach, including a description of who owned the data and the missing laptop.
2. Please describe in detail the facts and circumstances of this data breach, including a complete timeline of events pertaining to the breach.
3. Please identify the number of individuals affected by this data breach, and separately identify the number of Connecticut residents affected by this incident.
4. Please identify the form and manner in which the information was stored on the laptop.

5. Please identify the categories of information that were contained on the missing laptop.
6. Please identify the categories of information pertaining to Connecticut residents, and in particular what forms of PHI/PI were contained on the missing laptop.
7. Please describe the purpose of storing this PHI/PI on this particular laptop.
8. Please describe the efforts and methodology taken to determine the contents of the missing laptop.
9. Did the hospital have a business associate agreement in place with the vendor involved in this breach and/or the owner of the laptop (or his or her employer)? If so, please provide a copy of any such agreement.
10. Since the discovery of the breach, what measures have you or any third party vendor taken to safeguard sensitive information concerning the individuals affected (i.e., PI or PHI)?
11. Please describe all steps that the hospital or any other person or entity has taken to locate the missing laptop and prevent further use or dissemination of the information contained thereon.
12. What policies and/or procedures does the hospital have in place regarding HIPAA compliance and privacy/security protections for information of this sort? Please provide a copy of all such policies and procedures.
13. What policies and/or procedures does the hospital have in place regarding business associates and business associate agreements? Please provide a copy of all such policies and procedures.
14. Please provide a copy of all investigative reports or audits relative to this incident prepared by or for the hospital as of this date of this letter.
15. Please describe all steps the hospital has taken or will take to contact and warn all affected persons that their PHI may been compromised, including, but not limited to, when and how you first notified affected persons of this dissemination and/or breach, and whether you will individually notify each affected person about the breach.
16. Please explain in detail what plans, if any, the hospital is making for compliance with breach notifications under the Health Information Technology for Economic and Clinical Health Act and related Rules and Regulations for persons who have questions after notice is received

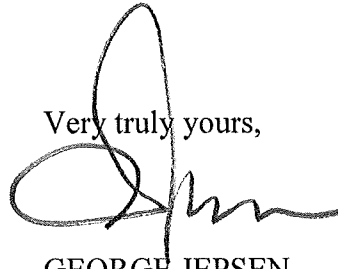
17. Please provide a copy of the specific notification letter that will be sent to Connecticut residents affected by this incident as well as a copy of any insurance policy offered in connection with the credit monitoring provided to affected individuals.
18. In addition to # 14 above, please provide a copy of any written summary, memorandum, or other writing that summarizes the facts and circumstances of this data breach, including any reports by any entity, including law enforcement or forensic expert, of this incident.
19. Please provide an outline of the plan, policies, and/or procedures you currently have, or developed, to prevent the recurrence of such a breach and a timeline for implementing that plan.

Given the circumstances of this incident, and as my office relayed to you this morning, I believe that in addition to the offering the affected individuals the two (2) years of credit monitoring services, together with an appropriate amount of identity theft insurance, the hospital should also permit them to place a "security freeze" on their credit reports, and to thaw the freeze, at the hospital's expense.

These protections, of course, are entirely separate from any potential enforcement actions. We reserve all of our rights in that regard.

I appreciate your cooperation in this matter and look forward to hearing from you. The information requested herein should be sent to Assistant Attorney General Matthew Fitzsimmons at 110 Sherman Street, Hartford, Connecticut 06105. Should you have any questions, you may contact AAG Fitzsimmons at 860-808-5400 or Matthew.Fitzsimmons@ct.gov.

Very truly yours,

A handwritten signature in black ink, appearing to read "G. Jepsen", written over the typed name.

GEORGE JEPSEN